



QUARTERLY STATEMENT

AS OF MARCH 31, 2006
OF THE CONDITION AND AFFAIRS OF THE

UnitedHealthcare Plan of the River Valley, Inc. f/k/a John Deere Health Plan, Inc.

NAIC Group Code

0707

(Current Period)

0219

(Prior Period)

NAIC Company Code

95378

Employer's ID Number

36-3379945

Organized under the Laws of

Illinois

, State of Domicile or Port of Entry

Illinois

Country of Domicile

United States of America

Licensed as business type:

Life, Accident & Health []

Property/Casualty []

Dental Service Corporation []

Vision Service Corporation []

Other []

Health Maintenance Organization [X]

Hospital, Medical & Dental Service or Indemnity []

Is HMO, Federally Qualified? Yes [] No [X]

Incorporated/Organized

08/05/1985

Commenced Business

12/19/1985

Statutory Home Office

1300 River Drive

(Street and Number)

Moline, IL 61265

(City or Town, State and Zip Code)

Main Administrative Office

1300 River Drive

(Street and Number)

Moline, IL 61265

(City or Town, State and Zip Code)

309-765-1200

(Area Code) (Telephone Number)

Mail Address

1300 River Drive, Suite 200

(Street and Number or P.O. Box)

Moline, IL 61265

(City or Town, State and Zip Code)

Primary Location of Books and Records

1300 River Drive

(Street and Number)

Moline, IL 61265

(City or Town, State and Zip Code)

309-765-1221

(Area Code) (Telephone Number)

Internet Website Address

JohnDeereHealth.com

Statutory Statement Contact

Joan G. Mincer

(Name)

309-765-1221

(Area Code) (Telephone Number) (Extension)

MincerJoanG@JohnDeere.com

(E-mail Address)

309-748-1146

(FAX Number)

Policyowner Relations Contact

1300 River Drive

(Street and Number)

Moline, IL 61265

(City or Town, State and Zip Code)

309-765-1200

(Area Code) (Telephone Number) (Extension)

OFFICERS

Name	Title	Name	Title
Richard Lowell Bartsh M.D.	President	James Alan Cousins	Treasurer
Victoria Jane Graves	Secretary		

OTHER OFFICERS

Bruce Chase Steffens M.D.	Chief Medical Officer	John William Kelly	Vice President
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DIRECTORS OR TRUSTEES

Forrest Gregory Burke #	Robert John Sheehy #	Richard Lowell Bartsh M.D.	James Edward Hecker
William Kenneth Appelgate	William Ernest Moeller #	Cathie Sue Whiteside	Thomas Patrick Wiffler #
Victoria Kauzlarich	David Scott Wichmann #	David Oscar Wiechers M.D. #	

State of Illinois
County of Rock Island ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Richard Lowell Bartsh M.D.
President

James Alan Cousins
Treasurer

Victoria Jane Graves
Secretary

Subscribed and sworn to before me this
15 day of May, 2006

Mary Ann Vickers, Executive Administrative Assistant
10/02/2007
10/02/2007

- a. Is this an original filing? Yes [X] No []
- b. If no,

1. State the amendment number

2. Date filed

3. Number of pages attached

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	193,271,363		193,271,363	193,635,245
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances).....			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$3,580,071), cash equivalents (\$0) and short-term investments (\$73,777,912)	77,357,983		77,357,983	20,793,473
6. Contract loans, (including \$premium notes)			0	0
7. Other invested assets	0	0	0	0
8. Receivables for securities	122,092		122,092	0
9. Aggregate write-ins for invested assets	0	0	0	0
10. Subtotals, cash and invested assets (Lines 1 to 9)	270,751,437	0	270,751,437	214,428,718
11. Title plants less \$charged off (for Title insurers only)			0	0
12. Investment income due and accrued	2,114,149		2,114,149	1,821,056
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in the course of collection	6,711,435		6,711,435	3,439,292
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$earned but unbilled premiums).....			0	0
13.3 Accrued retrospective premiums			0	0
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers			0	74,391
14.2 Funds held by or deposited with reinsured companies			0	0
14.3 Other amounts receivable under reinsurance contracts			0	0
15. Amounts receivable relating to uninsured plans			0	2,738,717
16.1 Current federal and foreign income tax recoverable and interest thereon			0	0
16.2 Net deferred tax asset.....			0	0
17. Guaranty funds receivable or on deposit			0	0
18. Electronic data processing equipment and software.....			0	0
19. Furniture and equipment, including health care delivery assets (\$)			0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
21. Receivables from parent, subsidiaries and affiliates			0	0
22. Health care (\$195,283) and other amounts receivable.....	195,283	42,284	152,999	152,999
23. Aggregate write-ins for other than invested assets	1,402,235	0	1,402,235	786,239
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23)	281,174,540	42,284	281,132,256	223,441,412
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
26. Total (Lines 24 and 25)	281,174,540	42,284	281,132,256	223,441,412
DETAILS OF WRITE-INS				
0901.				
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	0	0	0	0
2301. Accounts Receivable - Other.....	1,000,000		1,000,000	0
2302. Premium Tax Prepayment.....	402,235		402,235	786,239
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	1,402,235	0	1,402,235	786,239

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded)	87,286,777	5,710,550	92,997,327	88,665,041
2. Accrued medical incentive pool and bonus amounts	597,000		597,000	833,152
3. Unpaid claims adjustment expenses			0	0
4. Aggregate health policy reserves	1,187,965		1,187,965	581,805
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	29,160,210		29,160,210	3,441,726
9. General expenses due or accrued	2,616,000		2,616,000	2,446,543
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized gains (losses))	3,888,383		3,888,383	3,874,764
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	22,515,679		22,515,679	7,765,717
16. Payable for securities			0	0
17. Funds held under reinsurance treaties with (\$ authorized reinsurers and \$ unauthorized reinsurers)			0	0
18. Reinsurance in unauthorized companies			0	0
19. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
20. Liability for amounts held under uninsured plans			0	0
21. Aggregate write-ins for other liabilities (including \$ current)	264,819	0	264,819	440,322
22. Total liabilities (Lines 1 to 21)	147,516,832	5,710,550	153,227,382	108,049,069
23. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
24. Common capital stock	XXX	XXX	610,000	610,000
25. Preferred capital stock	XXX	XXX		0
26. Gross paid in and contributed surplus	XXX	XXX	37,441,000	37,441,000
27. Surplus notes	XXX	XXX		0
28. Aggregate write-ins for other than special surplus funds	XXX	XXX	1,500,000	1,500,000
29. Unassigned funds (surplus)	XXX	XXX	88,353,874	75,841,342
30. Less treasury stock, at cost:				
30.1 shares common (value included in Line 24)				
\$)	XXX	XXX		0
30.2 shares preferred (value included in Line 25)				
\$)	XXX	XXX		0
31. Total capital and surplus (Lines 23 to 29 minus Line 30)	XXX	XXX	127,904,874	115,392,342
32. Total liabilities, capital and surplus (Lines 22 and 31)	XXX	XXX	281,132,256	223,441,412
DETAILS OF WRITE-INS				
2101. Payables From Cost Contracts	188,046		188,046	268,678
2102. Accounts Payable - Other	76,773		76,773	171,644
2103.				
2198. Summary of remaining write-ins for Line 21 from overflow page	0	0	0	0
2199. Totals (Lines 2101 thru 2103 plus 2198) (Line 21 above)	264,819	0	264,819	440,322
2301.	XXX	XXX		
2302.	XXX	XXX		
2303.	XXX	XXX		
2398. Summary of remaining write-ins for Line 23 from overflow page	XXX	XXX	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	XXX	XXX	0	0
2801. Reserve and Restricted Funds	XXX	XXX	1,500,000	1,500,000
2802.	XXX	XXX		
2803.	XXX	XXX		
2898. Summary of remaining write-ins for Line 28 from overflow page	XXX	XXX	0	0
2899. Totals (Lines 2801 thru 2803 plus 2898) (Line 28 above)	XXX	XXX	1,500,000	1,500,000

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX		557,852
2. Net premium income (including \$0 non-health premium income).....	XXX	184,893,494	163,561,683
3. Change in unearned premium reserves and reserve for rate credits	XXX		0
4. Fee-for-service (net of \$0 medical expenses)	XXX		0
5. Risk revenue	XXX		0
6. Aggregate write-ins for other health care related revenues	XXX	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	184,893,494	163,561,683
Hospital and Medical:			
9. Hospital/medical benefits	10,634,077	120,383,842	121,629,503
10. Other professional services	417,156	3,489,748	4,195,216
11. Outside referrals			0
12. Emergency room and out-of-area	506,554	3,393,725	3,146,030
13. Prescription drugs		21,202,889	18,121,496
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....		533,000	1,535,990
16. Subtotal (Lines 9 to 15)	11,557,787	149,003,203	148,628,234
Less:			
17. Net reinsurance recoveries		372,724	50,788
18. Total hospital and medical (Lines 16 minus 17)	11,557,787	148,630,479	148,577,446
19. Non-health claims (net).....			0
20. Claims adjustment expenses, including \$ 890,301 cost containment expenses.....		3,490,781	3,878,884
21. General administrative expenses.....		18,190,110	16,152,100
22. Increase in reserves for life and accident and health contracts including \$ increase in reserves for life only).....			0
23. Total underwriting deductions (Lines 18 through 22)	11,557,787	170,311,370	168,608,430
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	14,582,123	(5,046,747)
25. Net investment income earned		2,628,154	2,136,031
26. Net realized capital gains (losses) less capital gains tax of \$.....0		(179,889)	107,646
27. Net investment gains (losses) (Lines 25 plus 26)	0	2,448,266	2,243,676
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)]			0
29. Aggregate write-ins for other income or expenses	0	100,000	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	17,130,389	(2,803,071)
31. Federal and foreign income taxes incurred	XXX	5,704,420	(1,356,628)
32. Net income (loss) (Lines 30 minus 31)	XXX	11,425,970	(1,446,443)
DETAILS OF WRITE-INS			
0601. Contractual Recoveries.....	XXX		0
0602. Audit Recoveries.....	XXX		0
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	0
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0
2901. Massachusetts Uncompensated Care Surcharge.....			0
2902. Other Income (Loss).....			0
2903. Fines & Penalties - Regulatory Authorities.....		100,000	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	100,000	0

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year
CAPITAL AND SURPLUS ACCOUNT:			
33. Capital and surplus prior reporting year.....	115,392,340	95,464,381	95,464,380
34. Net income or (loss) from Line 32	11,425,970	(1,446,443)	22,430,613
35. Change in valuation basis of aggregate policy and claim reserves		0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
37. Change in net unrealized foreign exchange capital gain or (loss)		0	0
38. Change in net deferred income tax		0	0
39. Change in nonadmitted assets	1,086,562	(1,158,493)	3,635,581
40. Change in unauthorized reinsurance	0	0	0
41. Change in treasury stock		0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles		0	0
44. Capital Changes:			
44.1 Paid in		0	0
44.2 Transferred from surplus (Stock Dividend)		0	0
44.3 Transferred to surplus		0	0
45. Surplus adjustments:			
45.1 Paid in		0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital		0	0
46. Dividends to stockholders		0	(5,600,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	(538,233)	(538,234)
48. Net change in capital & surplus (Lines 34 to 47)	12,512,531	(3,143,168)	19,927,960
49. Capital and surplus end of reporting period (Line 33 plus 48)	127,904,871	92,321,213	115,392,340
DETAILS OF WRITE-INS			
4701. Change in Non-Admitted assets Affecting Net Income.....		(2,245,843)	(2,245,844)
4702. Change in Accrual affecting Net Income.....		1,707,610	1,707,610
4703. Change in GAAP vs Statutory Value of Short Term Investments.....		0	0
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	0	(538,233)	(538,234)

STATEMENT AS OF 31 MARCH 2006 OF THE UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.
f/k/a JOHN DEERE HEALTH PLAN, INC.

Report #2A: TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

	2006		2005
	CURRENT PERIOD	YEAR TO DATE TOTAL	TOTAL
MEMBER MONTHS	238,824	238,824	1,041,695
REVENUES:			
1. TennCare Capitation	42,219,390	\$42,219,390	\$187,910,100
2. Adverse Selection	0	0	0
3. Total TennCare Revenue (Lines 1 and 2)	42,219,390	42,219,390	187,910,100
4. Investment	38,507	38,507	186,711
5. Other Revenue (Provide detail)	0	0	0
6. TOTAL REVENUES (Lines 3 to 5)	42,257,897	42,257,897	188,096,811
EXPENSES:			
Medical and Hospital Services:			
7. Capitated Physician Services	0	0	0
8. Fee-for Service Physician Services	13,329,827	13,329,827	58,812,379
9. Inpatient Hospital Services	10,127,023	10,127,023	45,427,166
10. Outpatient Services	5,778,835	5,778,835	25,374,180
11. Emergency Room Services	3,943,866	3,943,866	16,284,200
12. Mental Health Services	0	0	0
13. Dental Services	0	0	0
14. Vision Services	47,772	47,772	255,496
15. Pharmacy Services	129	129	(33,356)
16. Home Health Services	2,398,319	2,398,319	10,013,681
17. Chiropractic Services	0	0	0
18. Radiology Services	1,216,704	1,216,704	6,027,941
19. Laboratory Services	125,003	125,003	707,647
20. Durable Medical Equipment Services	1,298,922	1,298,922	6,077,050
21. Transportation Services	414,849	414,849	1,913,936
22. Outside Referrals	0	0	0
23. Medical Incentive Pool and Withhold Adjustments	0	0	0
24. Occupancy, Depreciation, and Amortization	0	0	0
25. Other Medical and Hospital Services (Provide Detail)	22,453	22,453	98,193
26. Subtotal (Lines 7 to 25)	38,703,702	38,703,702	170,958,513
LESS:			
27. Net Reinsurance Recoveries Incurred	0	0	0
28. Copayments	0	0	0
29. Subrogation and Coordination of Benefits	0	0	0
30. Subtotal (Lines 27 to 29)	0	0	0
31 TOTAL MEDICAL AND HOSPITAL (Lines 26 minus line 30)	38,703,702	38,703,702	170,958,513
Administration:			
32. Compensation	2,436,587	2,436,587	12,086,165
33. Marketing	74,099	74,099	367,551
34. Interest Expense	0	0	0
35. Premium Tax Expense	845,158	845,158	3,761,936
36. Occupancy, Depreciation and Amortization	198,352	198,352	983,882
37. Other Administration (Provide detail)	0	0	0
38. TOTAL ADMINISTRATION (Lines 32 to 37)	3,554,195	3,554,195	17,199,533
39. TOTAL EXPENSES (Lines 31 and 38)	42,257,897	42,257,897	188,158,047
40. Extraordinary Item			
41. Provision for Income Tax	0	0	(18,371)
42. NET INCOME (LOSS) (Line 6 less Lines 39, 40, and 41)	\$0	\$0	(\$42,865)
Write-ins:			
REVENUES:			
Line 5 Contractual Recoveries	0	0	0
Line 5 Deferral of Revenue for Administration fee Risk	0	0	0
EXPENSES:			
Line 25 Reinsurance Expense	0	0	0
Line 25 Nurseline	22,453	22,453	98,193
Line 25 Risk Sharing (Option #2) New Risk Arrangement	0	0	0
Line 25 Risk Sharing during Exigency	0	0	0
Line 37 Fines & Penalties- Regulatory Authorities	0	0	0

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

CASH FLOW

	1 Current Year To Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance.....	207,267,497	661,545,021
2. Net investment income	2,269,549	9,794,603
3. Miscellaneous income	100,000	(6,042)
4. Total (Lines 1 to 3)	209,637,046	671,333,582
5. Benefits and loss related payments	143,853,795	552,781,589
6. Net transfers to Separate, Segregated Accounts and Protected Cell Accounts.....		0
7. Commissions, expenses paid and aggregate write-ins for deductions	21,511,435	87,291,297
8. Dividends paid to policyholders		0
9. Federal and foreign income taxes paid (recovered) \$0 net of tax on capital gains (losses)	5,690,801	9,938,305
10. Total (Lines 5 through 9)	171,056,031	650,011,191
11. Net cash from operations (Line 4 minus Line 10)	38,581,015	21,322,391
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	10,066,101	24,518,389
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	10,066,101	24,518,389
13. Cost of investments acquired (long-term only):		
13.1 Bonds	9,996,484	27,924,185
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	9,996,484	27,924,185
14. Net increase (or decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	69,617	(3,405,796)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
16.5 Dividends to stockholders	0	5,600,000
16.6 Other cash provided (applied).....	17,913,878	(7,687,413)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	17,913,878	(13,287,413)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Lines 15 and 17)	56,564,510	4,629,182
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	20,793,473	16,164,291
19.2 End of period (Line 18 plus Line 19.1)	77,357,983	20,793,473

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care	Other
Total Members at end of:													
1. Prior Year	185,971	0	160,699	0	0	0	0	25,272	0	0	0	0	0
2 First Quarter	183,761		155,091					28,670					
3 Second Quarter	0												
4. Third Quarter	0												
5. Current Year	0												
6 Current Year Member Months	551,480		466,609					84,871					
Total Member Ambulatory Encounters for Period:													
7. Physician	287,368		197,485					89,877	6				
8. Non-Physician	48,493		38,893					9,599	1				
9. Total	335,861	0	236,378	0	0	0	0	99,476	7	0	0	0	0
10. Hospital Patient Days Incurred	31,979		11,376					20,600	3				
11. Number of Inpatient Admissions	5,383		2,871					2,511	1				
12. Health Premiums Written	185,069,098		113,701,021				2,965,236	60,342,397					8,060,444
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	185,069,098		113,701,021				2,965,236	60,342,397					8,060,444
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	144,670,918		93,387,386				2,844,950	41,521,138	60,109				6,857,335
18. Amount Incurred for Provision of Health Care Services	149,003,205		90,507,274				2,769,458	47,725,106	88,092				7,913,275

∞ ∞ ∞

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT
ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital & medical)	45,448,859	36,147,873	24,403,457	37,343,272	69,852,316	59,813,070
2. Medicare Supplement .....					.0	.0
3. Dental Only .....					.0	.0
4. Vision Only .....					.0	.0
5. Federal Employees Health Benefits Plan	1,449,223	10,040,141		2,204,382	1,449,223	2,052,840
6. Title XVIII - Medicare	11,766,146	16,042,328	9,425,659	16,896,403	21,191,805	23,469,774
7. Title XIX - Medicaid	3,119			26,345	3,119	25,389
8. Other Health	9,419,079	12,842,265		3,885,774	9,419,079	3,885,774
9. Health Subtotal (Lines 1 to 8).....	68,086,426	75,072,607	33,829,116	60,356,176	101,915,542	89,246,847
10. Healthcare receivables (a) .....					.0	.0
11. Other non-health .....					.0	.0
12. Medical incentive pools and bonus amounts	769,152			597,000	769,152	833,152
13. Totals	68,855,578	75,072,607	33,829,116	60,953,176	102,684,694	90,079,999

(a) Excludes \$0 loans and advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

NOTES TO THE QUARTERLY STATEMENT MARCH 31, 2006

1. DESCRIPTION OF BUSINESS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Description of Business - John Deere Health Plan, Inc. (the "Plan") is a wholly-owned subsidiary of John Deere Health Care, Inc. ("JDHC"), a wholly-owned subsidiary of UnitedHealth Group.

2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

No Change

3. BUSINESS COMBINATIONS

No Change

4. DISCONTINUED OPERATIONS

No Change

5. INVESTMENTS

.No Change

Mortgage Loans— No Change.

Debt Restructuring-- No Change.

Reverse Mortgages— No Change.

Loan-Backed Securities – No Change

Repurchase Agreements— No Change.

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

No Change.

7. INVESTMENT INCOME

No Change

8. DERIVATIVE INSTRUMENTS

No Change

9. INCOME TAXES

UnitedHealth Group, files a consolidated federal income tax return. UnitedHealth Group has a tax allocation agreement, which provides that each subsidiary of the consolidated group pay a current tax liability to, or receive a tax refund from, UHG, computed as if the subsidiary had filed a separate return at the statutory rates. 10. 10.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

The Treasury function is managed by UnitedHealth Group..

11. DEBT

No Change

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

No Change

13. CAPITAL AND SURPLUS, SHAREHOLDERS' DIVIDEND RESTRICTIONS AND QUASI- REORGANIZATIONS

No Change

NOTES TO FINANCIAL STATEMENTS

14. CONTINGENCIES

Contingent Commitments— No Change.

Assessments- Accounts Payable - No Change

Gain Contingencies— No Change

All Other Contingencies - No Change

15. LEASES

No Change

16. OFF-BALANCE SHEET RISK

No Change

17. SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENT OF LIABILITIES

No Change.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

No Change.

19. MANAGING GENERAL AGENTS

No Change.

20. SEPTEMBER 11 EVENTS

No Change.

21. OTHER ITEMS

Extraordinary Items— No Change.

Troubled Debt Restructuring (Debtors)— No Change.

22. SUBSEQUENT EVENTS

Effective February 24, 2006, JDHC became a wholly-owned subsidiary of United Healthcare, Inc.

23. REINSURANCE

Effective 1/1/2006, reinsurance contracts with Employers Re and Allianz were replaced by new contracts with the affiliated company, UnitedHealthcare Insurance Company located in Hartford, CT.

24. RETROSPECTIVELY RATED CONTRACTS

No Change

25. CLAIMS UNPAID

No Change

26. INTERCOMPANY POOLING ARRANGEMENTS

No Change

27. STRUCTURED SETTLEMENTS

No Change

28. HEALTHCARE RECEIVABLES

No Change

29. PARTICIPATING POLICIES

No Change

NOTES TO FINANCIAL STATEMENTS

30. PREMIUM DEFICIENCY RESERVES

No change

31. ANTICIPATED SALVAGE AND SUBROGATION

No change

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☒ No ☐
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☒ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☒ No ☐
- 2.2

If yes, date of change:

03/07/2006

If not previously filed, furnish herewith a certified copy of the instrument as amended.
3.

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☒ No ☐

If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐

If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2002
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2002
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

04/28/2004
- 6.4

By what department or departments?
Illinois Department of Insurance.....
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?.....

Yes ☐ No ☒
- 7.2

If yes, give full information:
.....
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?.....

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
.....
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?.....

Yes ☒ No ☐
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6	7
Affiliate Name	Location (City, State)	FRB	OCC	OTS	FDIC	SEC
Exante Bank.....	Salt Lake City, UT.....	No.....	No.....	No.....	Yes.....	No.....

GENERAL INTERROGATORIES

FINANCIAL

9.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
9.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$

INVESTMENT

10.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [] No [X]
10.2 If yes, explain:
.....

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
11.2 If yes, give full and complete information relating thereto:
.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA:\$0
13. Amount of real estate and mortgages held in short-term investments:\$0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Statement Value
14.21 Bonds	\$	\$
14.22 Preferred Stock	\$	\$
14.23 Common Stock	\$	\$
14.24 Short-Term Investments	\$	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [X]
If no, attach a description with this statement.

16. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1 - General, Section IV.H - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1	2
Name of Custodian(s)	Custodian Address
State Street Bank.....	801 Pennsylvania, Kansas City, MO 64105.....

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

16.3 Have there been any changes, including name changes in the custodian(s) identified in 16.1 during the current quarter? Yes [X] No []

16.4 If yes, give full and complete information relating thereto:

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason
Mellon Bank.....	State Street Bank.....	02/28/2006.....	

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration Depository	Name(s)	Address
113972.....	Standish Mellon Asset Management Company.....	One Boston Place, Suite 024-0344, Boston, MA 02108.....

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []
17.2 If no, list exceptions:
.....

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Increase (decrease) by adjustment		0
3. Cost of acquired		0
4. Cost of additions to and permanent improvements		0
5. Total profit (loss) on sales		0
6. Increase (decrease) by foreign exchange adjustment		0
7. Amount received on sales		0
8. Book/adjusted carrying value at end of current period	0	0
9. Total valuation allowance		0
10. Subtotal (Lines 8 plus 9)	0	0
11. Total nonadmitted amounts		0
12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0	0

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year	0	0
2. Amount loaned during period:		
2.1. Actual cost at time of acquisitions		0
2.2. Additional investment made after acquisitions		0
3. Accrual of discount and mortgage interest points and commitment fees		0
4. Increase (decrease) by adjustment		0
5. Total profit (loss) on sale		0
6. Amounts paid on account or in full during the period		0
7. Amortization of premium		0
8. Increase (decrease) by foreign exchange adjustment		0
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0	0
10. Total valuation allowance		0
11. Subtotal (Lines 9 plus 10)	0	0
12. Total nonadmitted amounts		0
13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)	0	0

SCHEDULE BA – VERIFICATION

Other Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	0	0
2. Cost of acquisitions during period:		
2.1. Actual cost at time of acquisitions		0
2.2. Additional investment made after acquisitions		0
3. Accrual of discount		0
4. Increase (decrease) by adjustment		0
5. Total profit (loss) on sale		0
6. Amounts paid on account or in full during the period		0
7. Amortization of premium		0
8. Increase (decrease) by foreign exchange adjustment		0
9. Book/adjusted carrying value of long-term invested assets at end of current period	0	0
10. Total valuation allowance		0
11. Subtotal (Lines 9 plus 10)	0	0
12. Total nonadmitted amounts		0
13. Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3)	0	0

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	193,635,245	190,395,262
2. Cost of bonds and stocks acquired	9,996,484	27,924,185
3. Accrual of discount	98,672	187,342
4. Increase (decrease) by adjustment		0
5. Increase (decrease) by foreign exchange adjustment		0
6. Total profit (loss) on disposal	(179,888)	176,293
7. Consideration for bonds and stocks disposed of	10,066,101	24,518,389
8. Amortization of premium	213,049	529,448
9. Book/adjusted carrying value, current period	193,271,363	193,635,245
10. Total valuation allowance		0
11. Subtotal (Lines 9 plus 10)	193,271,363	193,635,245
12. Total nonadmitted amounts		0
13. Statement value	193,271,363	193,635,245

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1	212,304,859	183,692,915	130,957,982	(113,435)	264,926,357	0	0	212,304,859
2. Class 2	2,123,860			(943)	2,122,917	0	0	2,123,860
3. Class 3	0				0	0	0	0
4. Class 4	0				0	0	0	0
5. Class 5	0				0	0	0	0
6. Class 6	0				0	0	0	0
7. Total Bonds	214,428,719	183,692,915	130,957,982	(114,378)	267,049,274	0	0	214,428,719
PREFERRED STOCK								
8. Class 1	0				0	0	0	0
9. Class 2	0				0	0	0	0
10. Class 3	0				0	0	0	0
11. Class 4	0				0	0	0	0
12. Class 5	0				0	0	0	0
13. Class 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	214,428,719	183,692,915	130,957,982	(114,378)	267,049,274	0	0	214,428,719

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter					
	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
8299999 Totals	73,777,912	XXX	73,777,912	138,055	0

SCHEDULE DA - PART 2- VERIFICATION

Short-Term Investments Owned		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	20,793,474	16,164,291
2. Cost of short-term investments acquired	173,696,431	83,170,196
3. Increase (decrease) by adjustment		0
4. Increase (decrease) by foreign exchange adjustment		0
5. Total profit (loss) on disposal of short-term investments		0
6. Consideration received on disposal of short-term investments	120,711,993	78,541,013
7. Book/adjusted carrying value, current period	73,777,912	20,793,474
8. Total valuation allowance		0
9. Subtotal (Lines 7 plus 8)	73,777,912	20,793,474
10. Total nonadmitted amounts		0
11. Statement value (Lines 9 minus 10)	73,777,912	20,793,474
12. Income collected during period	393,961	408,553
13. Income earned during period	393,961	408,553

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

**STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.**

SCHEDULE S—CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

[illegible]

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

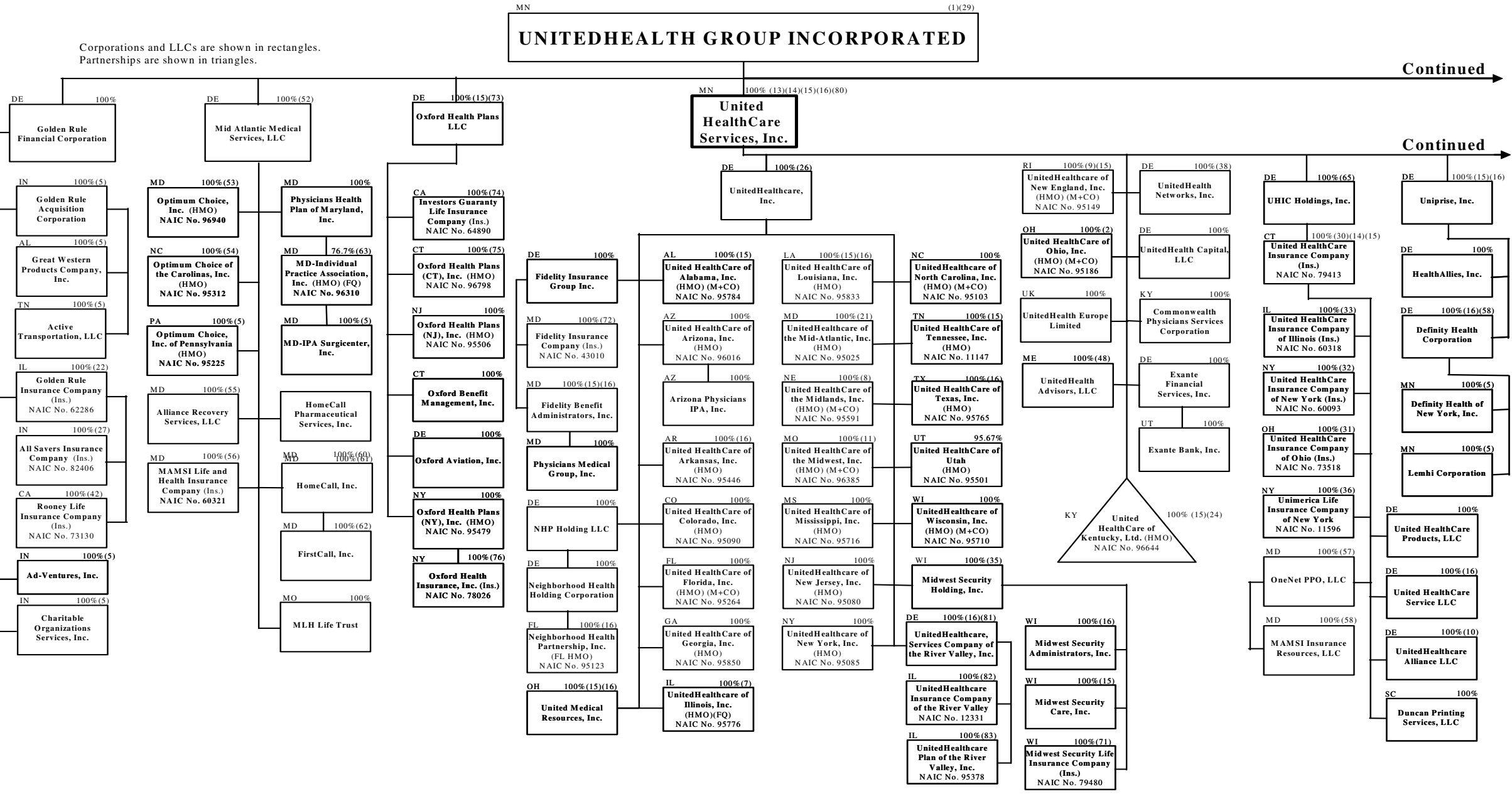
SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories									
States, Etc.	1	2	Direct Business Only Year-to-Date						
	Guaranty Fund (Yes or No)	Is Insurer Licensed? (Yes or No)	3	4	5	6	7	8	
			Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefit Program Premiums	Life and Annuity Premiums and Deposit-Type Contract Funds	Property/ Casualty Premiums	
1. Alabama	AL	No							
2. Alaska	AK	No							
3. Arizona	AZ	No							
4. Arkansas	AR	No							
5. California	CA	No							
6. Colorado	CO	No							
7. Connecticut	CT	No							
8. Delaware	DE	No							
9. District of Columbia	DC	No							
10. Florida	FL	No							
11. Georgia	GA	No							
12. Hawaii	HI	No							
13. Idaho	ID	No							
14. Illinois	IL	Yes	28,194,212	48,841,189					
15. Indiana	IN	No							
16. Iowa	IA	Yes	59,159,006	181,574		2,965,236			
17. Kansas	KS	No							
18. Kentucky	KY	No							
19. Louisiana	LA	No							
20. Maine	ME	No							
21. Maryland	MD	No							
22. Massachusetts	MA	No							
23. Michigan	MI	No							
24. Minnesota	MN	No							
25. Mississippi	MS	No							
26. Missouri	MO	No							
27. Montana	MT	No							
28. Nebraska	NE	No							
29. Nevada	NV	No							
30. New Hampshire	NH	No							
31. New Jersey	NJ	No							
32. New Mexico	NM	No							
33. New York	NY	No							
34. North Carolina	NC	No							
35. North Dakota	ND	No							
36. Ohio	OH	No							
37. Oklahoma	OK	No							
38. Oregon	OR	No							
39. Pennsylvania	PA	No							
40. Rhode Island	RI	No							
41. South Carolina	SC	No							
42. South Dakota	SD	No							
43. Tennessee	TN	Yes	27,730,234	11,243,424					
44. Texas	TX	No							
45. Utah	UT	No							
46. Vermont	VT	No							
47. Virginia	VA	Yes	6,678,012	76,212					
48. Washington	WA	No							
49. West Virginia	WV	No							
50. Wisconsin	WI	No							
51. Wyoming	WY	No							
52. American Samoa	AS								
53. Guam	GU								
54. Puerto Rico	PR								
55. U.S. Virgin Islands	VI								
56. Northern Mariana Islands	MP								
57. Canada	CN								
58. Aggregate Other Alien	OT	XXX	0	0	0	0	0	0	0
59. Subtotal	XXX	XXX	121,761,463	60,342,399	0	2,965,236	0	0	0
60. Reporting entity contributions for Employee Benefit Plans	XXX	XXX							
61. Total (Direct Business)	XXX	(a) 4	121,761,463	60,342,399	0	2,965,236	0	0	0
DETAILS OF WRITE-INS									
5801.									
5802.									
5803.									
5898. Summary of remaining write-ins for Line 58 from overflow page			0	0	0	0	0	0	0
5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)			0	0	0	0	0	0	0

(a) Insert the number of yes responses except for Canada and other Alien.

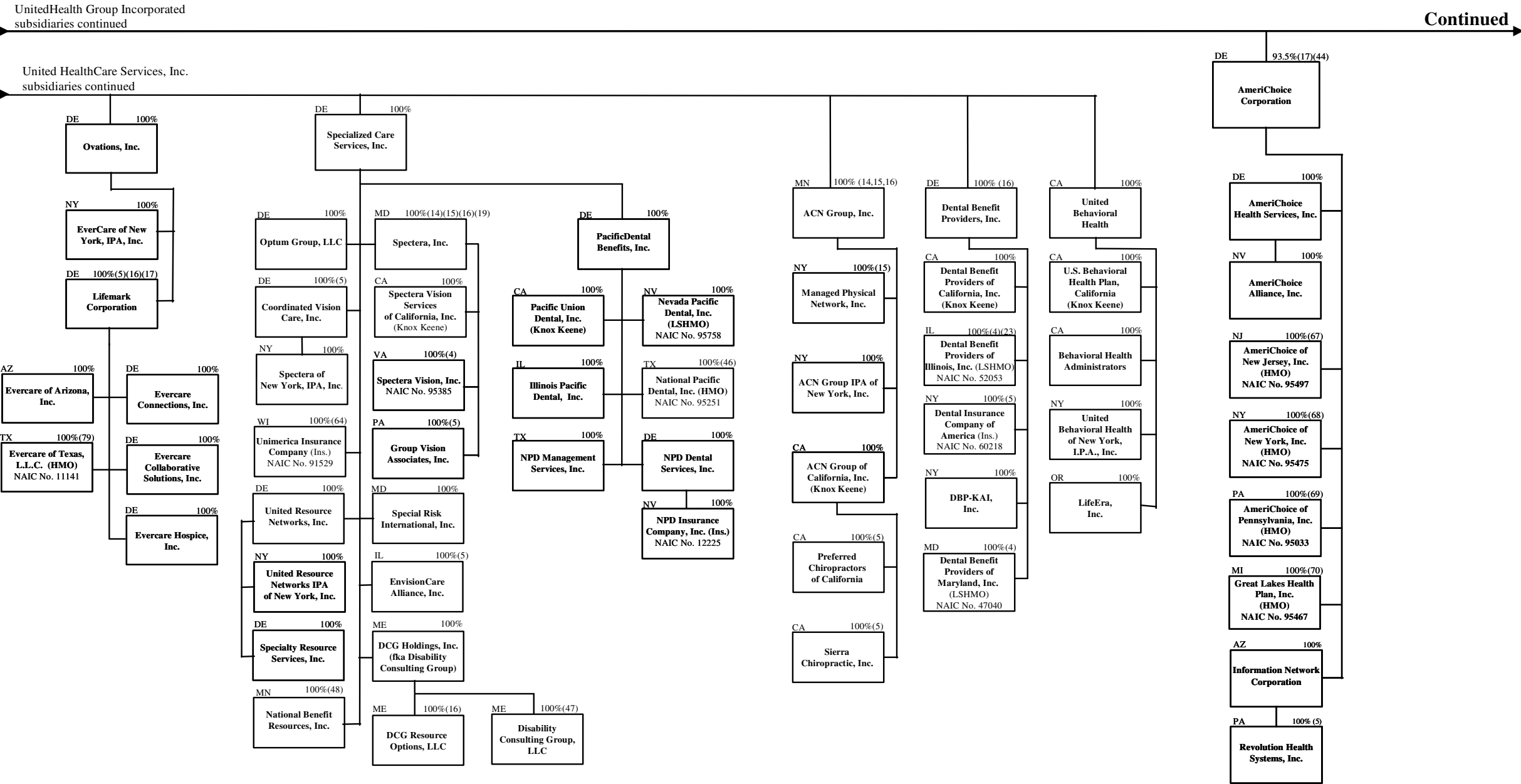
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SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



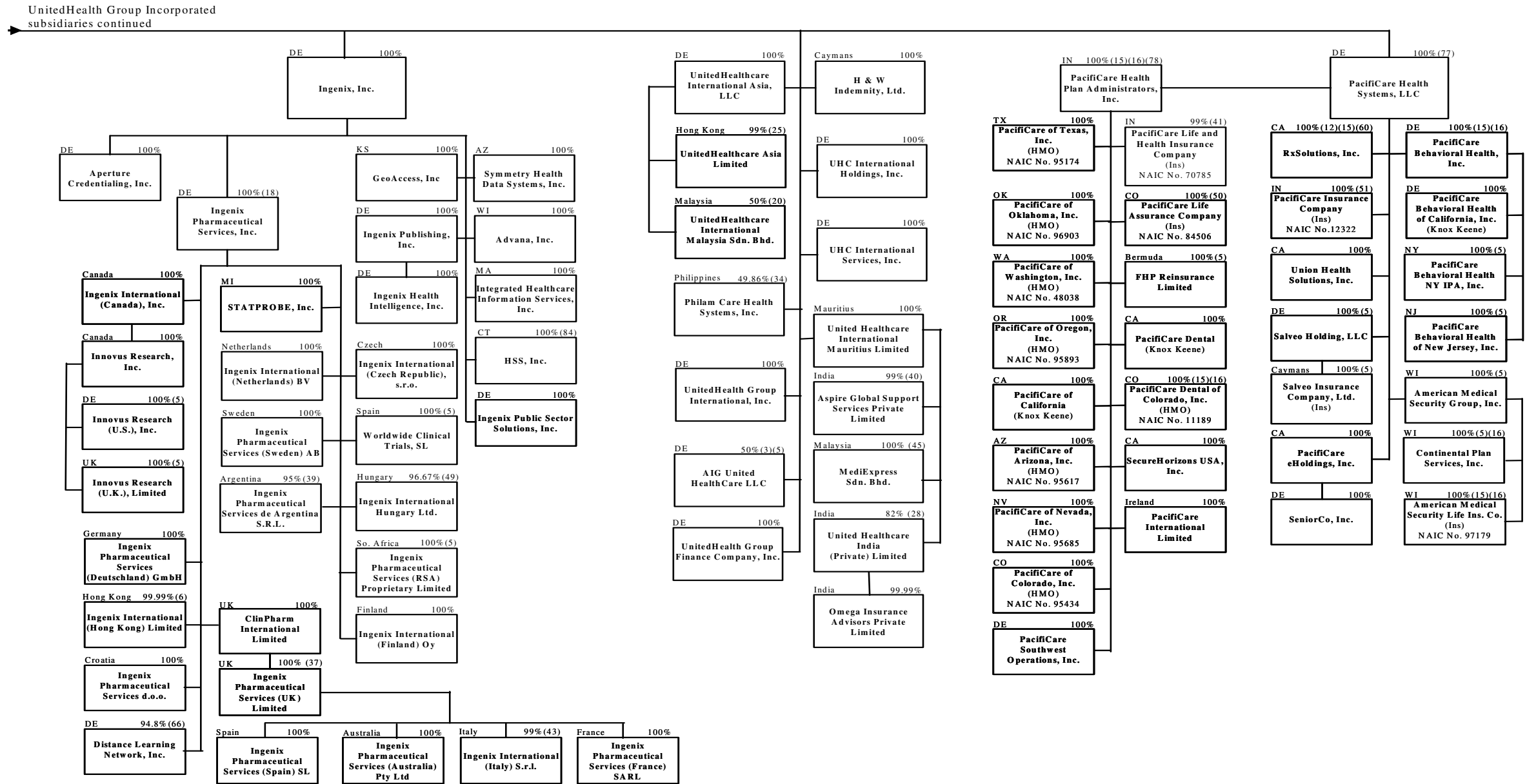
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SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
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SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



OVERFLOW PAGE FOR WRITE-INS

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

NONE

Schedule B - Part 2

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

E04

E04

E04

E04

E04

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identi- fication	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B/A. C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B/A. C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Maturity Date	NAIC Desig- nation or Market Indicator (a)
31359W-B6-9..	FNMA Note Callable 5.000% 04/26/17.....		..02/08/2006..	Mellon Bank.....		..959,150	..1,000,000	..997,140	..997,189	.....0	.....92	.....0	.....92	.....0	..997,281	.....0	.....(38,131)	.....(38,131)	.....14,306	..04/26/2017..	...1FE...
912827-W8-1..	US Treasury Note 5.625% 02/15/06.....		..02/15/2006..	Maturity.....		..1,000,000	..1,000,000	..1,007,344	..1,000,004	.....0	.....(4)	.....0	.....(4)	.....0	..1,000,000	.....0	.....0	.....0	..28,125	..02/15/2006..	...1....
0399999 - Bonds - U.S. Governments						..1,959,150	..2,000,000	..2,004,484	..1,997,193	.....0	.....88	.....0	.....88	.....0	..1,997,281	.....0	.....(38,131)	.....(38,131)	..42,431	.....XXX	...XXX...
312907-M6-2..	FHLMC Series 1171 CIs K CMO 8.000% 11/.....		..02/01/2006..	Paydown.....		.....1,000	.....1,000	.....989	.....996	.....0	.....4	.....0	.....4	.....0	..1,000	.....0	.....0	.....0	.....13	..11/15/2006..	...1FE...
312911-T8-3..	FHLMC Series 1369 CIs H CMO 6.500% 09/.....		..01/01/2006..	Paydown.....		.....9,529	.....9,529	.....9,195	.....9,473	.....0	.....56	.....0	.....56	.....0	..9,529	.....0	.....0	.....0	.....52	..09/15/2007..	...1FE...
312911-T8-3..	FHLMC Series 1369 CIs H CMO 6.500% 09/.....		..02/01/2006..	Paydown.....		.....9,547	.....9,547	.....9,213	.....9,491	.....0	.....56	.....0	.....56	.....0	..9,547	.....0	.....0	.....0	..103	..09/15/2007..	...1FE...
312911-T8-3..	FHLMC Series 1369 CIs H CMO 6.500% 09/.....		..03/01/2006..	Paydown.....		.....10,273	.....10,273	.....9,913	.....10,213	.....0	.....60	.....0	.....60	.....0	..10,273	.....0	.....0	.....0	..167	..09/15/2007..	...1FE...
312913-4Q-6..	FHLMC Series 1449 CIs H CMO 7.000% 12/.....		..01/01/2006..	Paydown.....		.....9,521	.....9,521	.....9,387	.....9,470	.....0	.....51	.....0	.....51	.....0	..9,521	.....0	.....0	.....0	..56	..12/15/2007..	...1FE...
312913-4Q-6..	FHLMC Series 1449 CIs H CMO 7.000% 12/.....		..02/01/2006..	Paydown.....		.....8,824	.....8,824	.....8,700	.....8,776	.....0	.....47	.....0	.....47	.....0	..8,824	.....0	.....0	.....0	..103	..12/15/2007..	...1FE...
312913-4Q-6..	FHLMC Series 1449 CIs H CMO 7.000% 12/.....		..03/01/2006..	Paydown.....		.....8,336	.....8,336	.....8,219	.....8,291	.....0	.....45	.....0	.....45	.....0	..8,336	.....0	.....0	.....0	..146	..12/15/2007..	...1FE...
312915-DN-8..	FHLMC Series 1490 CIs PH CMO 6.250% 04/.....		..01/01/2006..	Paydown.....		.....16,339	.....16,339	.....16,122	.....16,244	.....0	.....95	.....0	.....95	.....0	..16,339	.....0	.....0	.....0	..85	..04/15/2008..	...1FE...
312915-DN-8..	FHLMC Series 1490 CIs PH CMO 6.250% 04/.....		..02/01/2006..	Paydown.....		.....15,800	.....15,800	.....15,590	.....15,708	.....0	.....92	.....0	.....92	.....0	..15,800	.....0	.....0	.....0	..165	..04/15/2008..	...1FE...
312915-DN-8..	FHLMC Series 1490 CIs PH CMO 6.250% 04/.....		..03/01/2006..	Paydown.....		.....15,276	.....15,276	.....15,073	.....15,187	.....0	.....89	.....0	.....89	.....0	..15,276	.....0	.....0	.....0	..239	..04/15/2008..	...1FE...
3133T1-SR-4..	FHLMC Series 1601 CIs PJ CMO 6.000% 10/.....		..01/01/2006..	Paydown.....		.....33,280	.....33,280	.....33,873	.....33,417	.....0	.....(136)	.....0	.....(136)	.....0	..33,280	.....0	.....0	.....0	..166	..10/15/2008..	...1FE...
3133T1-SR-4..	FHLMC Series 1601 CIs PJ CMO 6.000% 10/.....		..02/01/2006..	Paydown.....		.....30,003	.....30,003	.....30,537	.....30,125	.....0	.....(123)	.....0	.....(123)	.....0	..30,003	.....0	.....0	.....0	..300	..10/15/2008..	...1FE...
3133T1-SR-4..	FHLMC Series 1601 CIs PJ CMO 6.000% 10/.....		..03/01/2006..	Paydown.....		.....30,736	.....30,736	.....31,284	.....30,862	.....0	.....(126)	.....0	.....(126)	.....0	..30,736	.....0	.....0	.....0	..461	..10/15/2008..	...1FE...
3133T4-XM-3..	FHLMC Series 1708 CIs E CMO 6.000% 03/.....		..01/01/2006..	Paydown.....		.....15,986	.....15,986	.....15,192	.....15,613	.....0	.....373	.....0	.....373	.....0	..15,986	.....0	.....0	.....0	..80	..03/15/2009..	...1FE...
3133T4-XM-3..	FHLMC Series 1708 CIs E CMO 6.000% 03/.....		..02/01/2006..	Paydown.....		.....14,144	.....14,144	.....13,441	.....13,814	.....0	.....330	.....0	.....330	.....0	..14,144	.....0	.....0	.....0	..141	..03/15/2009..	...1FE...
3133T4-XM-3..	FHLMC Series 1708 CIs E CMO 6.000% 03/.....		..03/01/2006..	Paydown.....		.....15,048	.....15,048	.....14,300	.....14,697	.....0	.....351	.....0	.....351	.....0	..15,048	.....0	.....0	.....0	..226	..03/15/2009..	...1FE...
3133T6-QQ-7..	FHLMC Series 1808 CIs A CMO 5.000% 10/.....		..01/01/2006..	Paydown.....		.....5,665	.....5,665	.....5,316	.....5,525	.....0	.....140	.....0	.....140	.....0	..5,665	.....0	.....0	.....0	..24	..10/15/2007..	...1FE...
3133T6-QQ-7..	FHLMC Series 1808 CIs A CMO 5.000% 10/.....		..02/01/2006..	Paydown.....		.....5,666	.....5,666	.....5,316	.....5,525	.....0	.....140	.....0	.....140	.....0	..5,666	.....0	.....0	.....0	..47	..10/15/2007..	...1FE...
3133T6-QQ-7..	FHLMC Series 1808 CIs A CMO 5.000% 10/.....		..03/01/2006..	Paydown.....		.....5,549	.....5,549	.....5,207	.....5,411	.....0	.....138	.....0	.....138	.....0	..5,549	.....0	.....0	.....0	..69	..10/15/2007..	...1FE...
3133TD-7D-2..	FHLMC Series 2038 CIs PC CMO 5.500% 02/.....		..01/01/2006..	Paydown.....		.....21,663	.....21,663	.....21,500	.....21,515	.....0	.....148	.....0	.....148	.....0	..21,663	.....0	.....0	.....0	..99	..02/15/2028..	...1FE...
3133TD-7D-2..	FHLMC Series 2038 CIs PC CMO 5.500% 02/.....		..02/01/2006..	Paydown.....		.....9,550	.....9,550	.....9,478	.....9,484	.....0	.....65	.....0	.....65	.....0	..9,550	.....0	.....0	.....0	..88	..02/15/2028..	...1FE...
3133TD-7D-2..	FHLMC Series 2038 CIs PC CMO 5.500% 02/.....		..03/01/2006..	Paydown.....		.....14,314	.....14,314	.....14,207	.....14,217	.....0	.....98	.....0	.....98	.....0	..14,314	.....0	.....0	.....0	..197	..02/15/2028..	...1FE...
31358T-TB-5..	FNMA Series 1993-14 CIs A CMO 6.000% 0.....		..01/01/2006..	Paydown.....		.....909	.....909	.....903	.....905	.....0	.....4	.....0	.....4	.....0	..909	.....0	.....0	.....0	..5	..02/25/2008..	...1FE...
31358T-TB-5..	FNMA Series 1993-14 CIs A CMO 6.000% 0.....		..02/01/2006..	Paydown.....		.....929	.....929	.....923	.....925	.....0	.....4	.....0	.....4	.....0	..929	.....0	.....0	.....0	..9	..02/25/2008..	...1FE...
31358T-TB-5..	FNMA Series 1993-14 CIs A CMO 6.000% 0.....		..03/01/2006..	Paydown.....		.....803	.....803	.....797	.....799	.....0	.....4	.....0	.....4	.....0	..803	.....0	.....0	.....0	..12	..02/25/2008..	...1FE...
31359A-EG-0..	FNMA Series 1993-93 CIs G CMO 6.750% 0.....		..01/01/2006..	Paydown.....		.....9,059	.....9,059	.....9,106	.....9,045	.....0	.....14	.....0	.....14	.....0	..9,059	.....0	.....0	.....0	..51	..03/25/2008..	...1FE...
31359A-EG-0..	FNMA Series 1993-93 CIs G CMO 6.750% 0.....		..02/01/2006..	Paydown.....		.....8,785	.....8,785	.....8,830	.....8,772	.....0	.....13	.....0	.....13	.....0	..8,785	.....0	.....0	.....0	..99	..03/25/2008..	...1FE...
31359A-EG-0..	FNMA Series 1993-93 CIs G CMO 6.750% 0.....		..03/01/2006..	Paydown.....		.....8,518	.....8,518	.....8,562	.....8,505	.....0	.....13	.....0	.....13	.....0	..8,518	.....0	.....0	.....0	..144	..03/25/2008..	...1FE...
31392B-2R-6..	QM CMO 6.000% 0.....		..01/01/2006..	Paydown.....		.....44,175	.....44,175	.....44,479	.....44,268	.....0	.....(94)	.....0	.....(94)	.....0	..44,175	.....0	.....0	.....0	..221	..07/25/2007..	...1FE...

STATEMENT AS OF MARCH 31, 2006 OF THE UnitedHealthcare Plan of the River Valley, Inc.
f/k/a John Deere Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identi- fication	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B/A. C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B/A. C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Maturity Date	NAIC Desig- nation or Market Indicator (a)
31392B-2R-6..	FNMA Series 2002-7 CIs QM CMO 6.000% 0..		..02/01/2006..	Paydown.....		..49,420	..49,420	..49,759	..49,524	.....0	.....(105)	.....0	.....(105)	.....0	.....49,420	.....0	.....0	.....0	..494	..07/25/2007..	..1FE..
31392B-2R-6..	FNMA Series 2002-7 CIs QM CMO 6.000% 0..		..03/01/2006..	Paydown.....		..30,159	..30,159	..30,366	..30,223	.....0	.....(64)	.....0	.....(64)	.....0	..30,159	.....0	.....0	.....0	..452	..07/25/2007..	..1FE..
31392H-EL-3..	FNMA Series 2002-97 CIs LP CMO 5.000%.....		..01/01/2006..	Paydown.....		..35,162	..35,162	..36,120	..35,856	.....0	.....(694)	.....0	.....(694)	.....0	..35,162	.....0	.....0	.....0	..147	..05/25/2007..	..1FE..
31392H-EL-3..	FNMA Series 2002-97 CIs LP CMO 5.000%.....		..02/01/2006..	Paydown.....		..22,251	..22,251	..22,858	..22,690	.....0	.....(439)	.....0	.....(439)	.....0	..22,251	.....0	.....0	.....0	..185	..05/25/2007..	..1FE..
31392H-EL-3..	FNMA Series 2002-97 CIs LP CMO 5.000%.....		..03/01/2006..	Paydown.....		..18,983	..18,983	..19,501	..19,358	.....0	.....(375)	.....0	.....(375)	.....0	..18,983	.....0	.....0	.....0	..237	..05/25/2007..	..1FE..
31392H-KK-8..	FNMA Series 2003-10 CIs PL CMO 4.000%.....		..01/01/2006..	Paydown.....		..2,969	..2,969	..2,939	..2,946	.....0	.....23	.....0	.....23	.....0	..2,969	.....0	.....0	.....0	..10	..05/25/2026..	..1FE..
31392H-KK-8..	FNMA Series 2003-10 CIs PL CMO 4.000%.....		..02/01/2006..	Paydown.....		..36,959	..36,959	..36,590	..36,679	.....0	.....280	.....0	.....280	.....0	..36,959	.....0	.....0	.....0	..246	..05/25/2026..	..1FE..
31392H-KK-8..	FNMA Series 2003-10 CIs PL CMO 4.000%.....		..03/01/2006..	Paydown.....		..39,968	..39,968	..39,569	..39,665	.....0	.....303	.....0	.....303	.....0	..39,968	.....0	.....0	.....0	..400	..05/25/2026..	..1FE..
31392J-LK-3..	FNMA Series 2003-15 CIs CP CMO 4.500%.....		..01/01/2006..	Paydown.....		..44,102	..44,102	..44,377	..44,077	.....0	.....24	.....0	.....24	.....0	..44,102	.....0	.....0	.....0	..165	..02/25/2008..	..1FE..
31392J-LK-3..	FNMA Series 2003-15 CIs CP CMO 4.500%.....		..02/01/2006..	Paydown.....		..25,293	..25,293	..25,452	..25,279	.....0	.....14	.....0	.....14	.....0	..25,293	.....0	.....0	.....0	..190	..02/25/2008..	..1FE..
31392J-LK-3..	FNMA Series 2003-15 CIs CP CMO 4.500%.....		..03/01/2006..	Paydown.....		..45,993	..45,993	..46,280	..45,967	.....0	.....26	.....0	.....26	.....0	..45,993	.....0	.....0	.....0	..517	..02/25/2008..	..1FE..
31393B-WE-1..	FNMA Series 2003-42 CIs HC CMO 4.500%.....		..01/01/2006..	Paydown.....		..16,394	..16,394	..16,409	..16,400	.....0	.....(7)	.....0	.....(7)	.....0	..16,394	.....0	.....0	.....0	..61	..06/25/2015..	..1FE..
31393B-WE-1..	FNMA Series 2003-42 CIs HC CMO 4.500%.....		..02/01/2006..	Paydown.....		..14,452	..14,452	..14,465	..14,458	.....0	.....(6)	.....0	.....(6)	.....0	..14,452	.....0	.....0	.....0	..108	..06/25/2015..	..1FE..
31393B-WE-1..	FNMA Series 2003-42 CIs HC CMO 4.500%.....		..03/01/2006..	Paydown.....		..14,520	..14,520	..14,533	..14,525	.....0	.....(6)	.....0	.....(6)	.....0	..14,520	.....0	.....0	.....0	..163	..06/25/2015..	..1FE..
31393F-SX-5..	FHLMC Series 2534 CIs HB CMO 5.000% 10.....		..01/24/2006..	Mellon Bank.....		..990,117	..1,000,000	..1,024,531	..1,016,663	.....0	.....402	.....0	.....402	.....0	..1,017,064	.....0	.....(26,947)	.....(26,947)	..7,778	..07/15/2012..	..1FE..
31393H-UF-7..	FHLMC Series 2548 CIs HA CMO 4.500% 01.....		..01/01/2006..	Paydown.....		..35,734	..35,734	..35,673	..35,673	.....0	.....62	.....0	.....62	.....0	..35,734	.....0	.....0	.....0	..134	..01/15/2010..	..1FE..
31393H-UF-7..	FHLMC Series 2548 CIs HA CMO 4.500% 01.....		..02/01/2006..	Paydown.....		..26,009	..26,009	..25,964	..25,964	.....0	.....45	.....0	.....45	.....0	..26,009	.....0	.....0	.....0	..195	..01/15/2010..	..1FE..
31393H-UF-7..	FHLMC Series 2548 CIs HA CMO 4.500% 01.....		..03/01/2006..	Paydown.....		..17,578	..17,578	..17,548	..17,548	.....0	.....30	.....0	.....30	.....0	..17,578	.....0	.....0	.....0	..198	..01/15/2010..	..1FE..
31393L-2X-0..	FHLMC Series 2574 CIs PN CMO 4.500% 06.....		..02/08/2006..	Mellon Bank.....		..978,242	..1,000,000	..997,344	..997,498	.....0	.....4	.....0	.....4	.....0	..997,502	.....0	.....(19,260)	.....(19,260)	..9,000	..06/15/2028..	..1FE..
31393P-LN-2..	FHLMC Series 2602 CIs WB CMO 5.000% 09.....		..01/24/2006..	Mellon Bank.....		..990,078	..1,000,000	..1,031,875	..1,022,386	.....0	.....577	.....0	.....577	.....0	..1,022,963	.....0	.....(32,885)	.....(32,885)	..7,778	..11/15/2012..	..1FE..
36220N-VU-8..	GNMA Pool 283327 (MBS) 9.000% 12/15/19.....		..01/01/2006..	Paydown.....		..57	..57	..57	..57	.....0	.....0	.....0	.....0	.....0	..57	.....0	.....0	.....0	..0	..12/15/2019..	..1FE..
36220N-VU-8..	GNMA Pool 283327 (MBS) 9.000% 12/15/19.....		..02/01/2006..	Paydown.....		..58	..58	..58	..58	.....0	.....0	.....0	.....0	.....0	..58	.....0	.....0	.....0	..1	..12/15/2019..	..1FE..
36220N-VU-8..	GNMA Pool 283327 (MBS) 9.000% 12/15/19.....		..03/01/2006..	Paydown.....		..691	..691	..691	..691	.....0	.....0	.....0	.....0	.....0	..691	.....0	.....0	.....0	..16	..12/15/2019..	..1FE..
383739-RL-5..	GNMA Series 2001-6 CIs PM CMO 6.500% 0..		..01/01/2006..	Paydown.....		..31,313	..31,313	..32,213	..31,845	.....0	.....(532)	.....0	.....(532)	.....0	..31,313	.....0	.....0	.....0	..170	..12/16/2008..	..1FE..
383739-RL-5..	GNMA Series 2001-6 CIs PM CMO 6.500% 0..		..02/01/2006..	Paydown.....		..20,079	..20,079	..20,656	..20,420	.....0	.....(341)	.....0	.....(341)	.....0	..20,079	.....0	.....0	.....0	..218	..12/16/2008..	..1FE..
383739-RL-5..	GNMA Series 2001-6 CIs PM CMO 6.500% 0..		..03/01/2006..	Paydown.....		..19,534	..19,534	..20,095	..19,865	.....0	.....(332)	.....0	.....(332)	.....0	..19,534	.....0	.....0	.....0	..317	..12/16/2008..	..1FE..
38374H-K7-4..	GNMA Series 2004-72 CIs DE CMO 5.000%.....		..01/24/2006..	Mellon Bank.....		..968,086	..1,000,000	..1,009,063	..1,008,350	.....0	.....163	.....0	.....163	.....0	..1,008,513	.....0	.....(40,427)	.....(40,427)	..7,778	..01/20/2018..	..1FE..
3199999 - Bonds - Special Revenues						4,853,425	4,926,902	4,990,639	4,971,940	0	1,004	0	1,004	0	4,972,944	0	(119,519)	(119,519)	40,526	XXX	XXX
200339-AP-4..	Comerica Bank Corporate Note Non Callabl.....		..01/20/2006..	Mellon Bank.....		..823,720	..800,000	..796,101	..798,972	.....0	.....99	.....0	.....99	.....0	..799,071	.....0	.....24,649	.....24,649	..6,444	..06/15/2007..	..1FE..
423328-BS-1..	Heller Financial, Inc Corporate Note - N.....		..03/15/2006..	Maturity.....		..1,000,000	..1,000,000	..1,012,480	..1,000,367	.....0	.....(367)	.....0	.....(367)	.....0	..1,000,000	.....0	.....0	.....0	..31,875	..03/15/2006..	..1FE..
670346-AE-5..	Nucor Corporation Corporate Note Cont Ca.....		..02/08/2006..	Mellon Bank.....		..1,429,806	..1,475,000	..1,477,155	..1,477,114	.....0	.....(420)	.....0	.....(420)	.....0	..1,476,694	.....0	.....(46,888)	.....(46,888)	..26,366	..10/01/2012..	..1FE..
4599999 - Bonds - Industrial and Miscellaneous						3,253,526	3,275,000	3,285,737	3,276,452	0	(688)	0	(688)	0	3,275,765	0	(22,239)	(22,239)	64,685	XXX	XXX
6099997 - Bonds - Part 4						10,066,101	10,201,902	10,280,860	10,245,585	0	404	0	404	0	10,245,989	0	(179,886)	(179,886)	147,641	XXX	XXX

E05.2

E05.2

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E05.2

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

SCHEDULE E - PART 1 - CASH

E08

E09

Showing Investments Owned End of Current Quarter

1 CUSIP Identification	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Gross Investment Income
NONE								
0199999 Total Cash Equivalents								

**STATEMENT AS OF MARCH 31, 2006 OF UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.
f/k/a JOHN DEERE HEALTH PLAN, INC.**

PREMIUMS, ENROLLMENT AND UTILIZATION TABLE

TennCare Supplement	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	13
		2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Medicare	Medicaid	TennCare Self-Funded	Other
Total Members at end of:											
1. Prior Year	138,103		37,633				XXX	19,807		80,663	-
2. First Quarter	117,901		35,140				XXX	5,234		77,527	-
3. Second Quarter	-						XXX				-
4. Third Quarter	-						XXX				-
5. Current Year	-						XXX				-
6. Current Year Member Months	358,404		103,882				XXX	15,698		238,824	-
Total Member Ambulatory Encounters for Year:											
7. Physician	185,869		50,289				XXX	34,865		100,715	-
8. Non-Physician	28,856		6,065				XXX	4,394		18,397	-
9. Total	214,725		56,354				XXX	39,259		119,112	-
10. Hospital Patient Days Incurred	32,441		2,814				XXX	12,917		16,710	-
11. Number of Inpatient Admissions	5,209		693				XXX	1,253		3,263	-
12. Premiums Collected	38,973,655		26,097,941				XXX	11,243,422			1,632,292
13. Life Premiums Direct	-						XXX				
14. Property/Casualty Premiums Written	-						XXX				
15. Health Premiums Earned	38,973,655		26,097,941				XXX	11,243,422			1,632,292
16. Property/Casualty Premiums Earned	-						XXX				
17. Amount Paid for Provision of Health Care Services	93,501,807		24,389,596				XXX	27,436,110		37,507,203	4,168,897
18. Amount Incurred for Provision of Health Care Services	85,456,058		22,398,232				XXX	22,275,401		37,548,536	3,233,888

STATEMENT AS OF MARCH 31, 2006 FOR
UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.
f/k/a JOHN DEERE HEALTH PLAN, INC.

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

Individually list all debtors with account balances the greater of 10% of gross Premiums Receivable or \$10,000.

Name of Debtor	1-30 Days	31-60 Days	61-90 Days	Over 90 Days	Non Admitted	Admitted
Total Individuals	0	0	0	0	0	0
Group subscribers:						
FEDERAL EMPLOYEES	\$ -	\$ 2,287,006.96	\$ 303,869.50	\$ -	\$ -	\$ 2,590,876.46
Group subscriber subtotal	\$ -	\$ 2,287,006.96	\$ 303,869.50	\$ -	\$ -	\$ 2,590,876.46
Premiums due and unpaid not individually listed	\$ 2,042,860.86	\$ 2,179,544.64	\$ (101,846.53)	\$ -	\$ -	\$ 4,120,558.97
Total group	\$ 2,042,860.86	\$ 4,466,551.60	\$ 202,022.97	\$ -	\$ -	\$ 6,711,435.43
Premiums due and unpaid from Medicare entities	\$ -	\$ -	\$ -	\$ 228,939.12		\$ 228,939.12
Premiums due and unpaid from Medicaid entities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Accident and health premiums due and unpaid (Page 2, Line 13.1)	\$ 2,042,860.86	\$ 4,466,551.60	\$ 202,022.97	\$ 228,939.12	\$ -	\$ 6,711,435.43

(2,940,000)

STATEMENT AS OF MARCH 31, 2006 OF JOHN DEERE HEALTH PLAN, INC.

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

[illegible]